

DOE F 470.1

(11-02)

Replaces DOE F 470.1 and DOE F 470.1a (04-01)

All Other Editions are Obsolete

U.S. Department of Energy

CONTRACT SECURITY CLASSIFICATION SPECIFICATION (CSCS)

- 1 -

1. CSSC No.:		2. Previous CSCS No.:		3a. Reason for Action: (Check One) <input checked="" type="checkbox"/> Add <input type="checkbox"/> Change <input type="checkbox"/> Terminate b. Item Numbers Modified:	
4. This Specification Is For: (Complete as Applicable)				5. Specification Is: (Complete as Applicable)	
(Check One) a. <input checked="" type="checkbox"/> Contract or Other Number <input checked="" type="checkbox"/> Solicitation b. Contract Number: <u>RP01-06SO40502</u> End Date: _____ (Estimated) c. Contract Number of Prime: _____ End Date: _____ (Complete if registering or soliciting a subcontract) (Estimated)				a. Original (Complete data in all cases) Date <u>12/01/05</u>	
				b. Revised (Supersedes all previous specifications) Date _____	
				c. Certificate of Possession Date _____	
				Retention of Classified Matter is Authorized Until Date _____	
				d. Final Date _____	
				Certificate of Non Possession Date _____	
6. General Identification of this Procurement					
Technical Support Services for the New Brunswick Laboratory					
7. Contractor					
a. Facility Code		b. Name, Address, and Zip Code		c. Lead Responsible Office (Name, Address, and Zip Code)	
		TBD			
8. Prime Contractor (Complete if registering or soliciting a subcontract)					
a. Facility Code		b. Name, Address, and Zip Code		c. Lead Responsible Office (Name, Address, and Zip Code)	
				DOE, Office of Security 19901 Germantown Road Germantown Md 20874	
9. Actual Place of Performance (DOE Facilities) (Attach additional entries as necessary on page 3)					
a. Facility Code		b. Name, Address, and Zip Code		c. Lead Responsible Office (Name, Address, and Zip Code)	
		DOE New Brunswick Laboratory 9800 South Cass Ave Build 350 Argonne, IL 60439		DOE, Office of Security 19901 Germantown Road Germantown Md 20874	
Actual Place of Performance (NON DOE Facilities) (Attach additional entries as necessary)					
a. ID Code		b. Name, Address, and Zip Code		c. Lead Responsible Office (Name, Address, and Zip Code)	
10. Clearance and Storage				11. This Contract Will Require Access To:	
A. Level of Facility Clearance Required: <u>TS</u> B. Level of Storage Required: <u>U</u> C. Access Authorization <input checked="" type="checkbox"/> Q <input type="checkbox"/> L				A. <input checked="" type="checkbox"/> RD <input checked="" type="checkbox"/> FRD <input checked="" type="checkbox"/> NSI B. <input checked="" type="checkbox"/> SCI <input type="checkbox"/> COMSEC <input type="checkbox"/> OTHER DCI CAVEAT <input checked="" type="checkbox"/> FGI <input type="checkbox"/> OTHER: _____ <input checked="" type="checkbox"/> NATO	
12. In Performing this Contract, the Contractor Will:					
<input checked="" type="checkbox"/> Have Access to Classified Information Only at Another Contractor's Facility or a Government Activity <input checked="" type="checkbox"/> Generate Classified Matter <input checked="" type="checkbox"/> Perform Services That Require Unescorted Access to Security Areas <input type="checkbox"/> Have Access to U.S. Classified Information Outside the U.S., Puerto Rico, U.S. Possessions and Trust Territories <input type="checkbox"/> Other (Specify)				<input checked="" type="checkbox"/> Receive Classified Matter <input checked="" type="checkbox"/> Fabricate, Modify, or Store Classified Items (e.g., Hardware or Substances) <input checked="" type="checkbox"/> Be Authorized to Use the Services of the Office of Scientific & Technical Information to Receive Classified Matter <input type="checkbox"/> Require a COMSEC Account <input type="checkbox"/> Be Authorized to Use the Defense Courier Service	

13. Classification Guidance

The classification guidance needed for this classified effort is identified below. Note: Guidance which is in itself classified should be referenced here and provided under separate cover.

CG-SS4

14. Security Requirements

Security requirements are established for this contract and are identified in the following contracts/solicitation clauses.

☒ DEAR 952.204-2 Security Requirements☒ DEAR 952.204-73 Facility Clearance (Solicitation)☒ DEAR 952.204-70 Classification/Declassification☐ DEAR 970.5204.1 Counterintelligence (for management contracts ONLY)

15. Surveys

DOE Surveying Office Is _____

Elements of this contract are outside the survey responsibility of the lead responsible office and/or the surveying office.

☐ No☐ Yes (Identify specific areas and provide explanation/justification for each)

16. Certification and Signature. Security requirements stated herein are complete and adequate for safeguarding the classified information to be released or generated under this classified contract. All questions shall be referred to the official named below:

A. Typed Name of Procurement Request Originator

B. Title and Organization

C. Telephone (Include Area Code)

D. Address (Include Zip Code)

U.S. Department of Energy
19901 Germantown Road
Germantown, MD 20874

E.

Signature _____

Date _____

17. Typed Name of Contracting Official

Signature _____

Date _____

18. Typed Name of Classification Officer (Approval of Block 13)

Signature _____

Date _____

19a. Typed Name of Local DOE Security Officer

Signature _____

a. Responsible Office HQ

Date _____

20. Required Distribution

☒ Contractor☒ Subcontractor☒ Lead Responsible Office (LRO)☒ Administering Contracting Officer☐ Surveying Office If Different than LRO☒ Others, as Necessary

21. General Comments:

9. Actual Place of Performance - DOE Facilities		
a. Facility Code	b. Name, Address, and Zip Code U.S. Department of Energy 19901 Germantown Road Germantown, MD 20874	c. Lead Responsible Office (Name, Address, and Zip Code) SP-1.2
a. Facility Code	b. Name, Address, and Zip Code U.S. Department of Energy 1000 Independence Ave SW Washington, DC 20585	c. Lead Responsible Office (Name, Address, and Zip Code) SP-1.2
a. Facility Code	b. Name, Address, and Zip Code	c. Lead Responsible Office (Name, Address, and Zip Code)
a. Facility Code	b. Name, Address, and Zip Code	c. Lead Responsible Office (Name, Address, and Zip Code)
a. Facility Code	b. Name, Address, and Zip Code	c. Lead Responsible Office (Name, Address, and Zip Code)

9. Actual Place of Performance - NON DOE Facilities		
a. ID Code	b. Name, Address, and Zip Code	c. Lead Responsible Office (Name, Address, and Zip Code)
a. ID Code	b. Name, Address, and Zip Code	c. Lead Responsible Office (Name, Address, and Zip Code)
a. ID Code	b. Name, Address, and Zip Code	c. Lead Responsible Office (Name, Address, and Zip Code)
a. ID Code	b. Name, Address, and Zip Code	c. Lead Responsible Office (Name, Address, and Zip Code)
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